

Long Term Care Coordinating Council

FULL COUNCIL MEETING

Wednesday, March 8, 2006

Room 313 jV State House

Providence, Rhode Island

10:00 a.m. to 11:30 a.m.

Minutes

I. Call to Order jV

Executive Director Maureen Maigret called the meeting to order at 10:05 a.m.

She explained that Lt. Governor Fogarty would be detained and had asked her to call the meeting to order and begin the agenda starting with the Chairman's report.

In Attendance were:

Lt. Gov. Charles Fogarty, Chairman Dr. Louis Marino

Maureen Maigret, Executive Director Elizabeth Morancy

Maria Barros Senator Elizabeth Roberts

Mary Benway Nancy Roberts

Kathleen Carland Corinne Calise Russo

Cynthia Conant-Arp Ray Rusin

Deborah Miller (rep. Kathleen Connell) Bonnie Sekeres

Jim Flanagan Karen Smith

Dick Freeman Susan Sweet

Dr. David Gifford John McGehearty (rep. AG's office)

Roberta Hawkins Sister Marietta Walsh

John Young (rep. Jane Hayward)

Bill Jackson

II. Approval of Minutes of February 1, 2006

Ms. Maigret called for a motion for approval of the minutes of February 1st as they had been distributed with revisions noted by DEA staff. Upon motion of Ms. Barros, the minutes were unanimously approved by those present.

III. Chairman's Report (Reported by Ms. Maigret for Chairman Fogarty)

1. As a follow-up to the discussion and motion passed at the Feb 1st meeting to communicate with RI Congressional delegation, letters were sent to Congressional delegation requesting them to "replace Medicare Part D with a new program that would be truly effective in providing prescription drug assistance without serious administrative burdens, inequities and gaps that have been exposed with the current Medicare Part D plan".

2. A program, "Innovations in Home and Community Care" is being sponsored jointly by the LTCCC and CHOICES COALITION. It will be held on April 6th at AMICA in Lincoln from 8:30 to 12 noon. Presenters will include Aging and Disabilities Commissioner Patrick Flood from Vermont, Secretary Jennifer Carey of the Mass. Executive Office of Elder Affairs and RI state officials. A flyer on the program was distributed. (Attachment #1)

3. The OSAIC is sponsoring a PNEUMONVAX Campaign during the month of April and a number of clinics have been scheduled. A list of the clinics to date and Guidelines for receiving the vaccine was distributed. (Attachment #2)

4. Fall Prevention Partnership - The work of the Fall Prevention Partnership, which had been started by Chairman Fogarty, will be carried on by HEALTH's "Falls Injury Prevention Subcommittee" of their RI Injury Community Planning Group. The Subcommittee is chaired by Dr. Pat Burbank of URI College of Nursing. Anyone interested, and not yet participating should contact Maureen Maigret.

5. HEALTH issued an Implementation Report on the 2005 Long Term Care Reform legislation. Copies of the report were available for those interested. (Attachment #3)

IV. Reports

1. HEALTH - Monthly Survey Report iV Ray Rusin

Ray Rusin provided written copies of the Office of Facilities Regulation Substandard Care Reports for January and February. He noted that he had given the January report verbally as there had only been a three-week lag prior to the January meeting and that the written report had not been ready for the February 1st meeting. He noted that for the month of February, eight nursing homes had been inspected. One facility, Tockwotton Home, was deficiency free and the remaining seven facilities had areas of concern that needed correction but no citations for "actual harm". In February, HEALTH

also did follow up surveys on thirteen facilities and all were found to be in compliance.

Ms. Maigret asked if Mt. St. Francis, which had had a fourth follow up inspection and had been on track for possible Medicare de-certification, had corrected its deficiencies. Mr. Rusin reported that the fourth follow up inspection had been made and the facility had been found to be in compliance. (Attachments 4 & 5)

2. Legislation Committee ¡V Maureen Maigret

Ms. Maigret presented the report for Senator Gibbs and Representative Ginaitt and reviewed the Legislative Tracker updated as to March 7th. (Attachment # 6) Dr. Gifford asked if Ms. Maigret would add Senator Roberts' bill relating to coordination of adult vaccines to the Legislative Tracker and Ms. Maigret indicated she would do so. Ms. Maigret also asked if anybody had additional items that they wished to add to the Tracker to let her know.

1. DHS ¡V Update on Consultant Study Reports - John Young

John Young reported that the University of Maryland consultants had begun to set up the interview process but that the process might need some modification due to scheduling conflicts of the many individuals that they would like to obtain input from for the study in order to have it completed in a timely manner.

2. FY2007 Budget Overview

„h HEALTH - Dr. David Gifford

Dr. Gifford reported that HEALTH is not just involved in oversight of nursing homes but that other provider types fall under their jurisdiction and that they also administer the public quality reporting

program that applies to some long term care facilities. He noted that a vendor had been selected for the home health agency consumer satisfaction reporting process and that RI would lead the nation in this effort. He noted that the department is also involved in developing data on nurse sensitive measures including pressure ulcers.

Dr. Gifford noted that the department responded to nine nursing homes during the flu vaccination season to assist them in getting vaccine supplies and that there had been two outbreaks of influenza infections in nursing homes and that the department staff also tracks data on nursing home employee flu immunizations.

In the area of nursing homes complaints, Dr. Gifford said that the trend was moving upward. In 2004 there had been 1,500 complaints and in 2005 that figure had increased to 2,500. They project for 2006 the figure might reach 3,000, however, he feels this is most likely due to media and public awareness and not necessarily a decrease in the quality of care.

Dr. Gifford noted that budget cuts proposed to the department will not effect their work in the long term care arena. However, a challenge for the future will be to deal with funding coming from CMS, as the federal government does not provide COLA's and that this might cause the department to have a structural deficit. Ms. Maigret inquired about the status of the department's oversight of home care agencies and noted that the department had indicated previously that, although in the past they had not been able to fulfill the requirements of the law for annual inspections, that they should be

on track to complete annual inspections of home care providers in the current fiscal year. Dr. Gifford indicated that they are, in fact, on track to meet this statutory requirement.

(Note: Chairman Fogarty arrived and conducted the meeting at this point)

„h Elderly Affairs - Director Corinne Russo

Director Russo provided an attachment (Attachment # 7) and reviewed her department's proposed budget FY 2007. She noted that the department has a new \$138,000 initiative to strengthen elder protection services to add an after-hours component and that would include a crisis intervention capacity. She reported that THE POINT is doing extremely well in its first months of operation, receiving 13,000 calls in the first four months.

She reported that 12,000 RIPAE enrollees had been re-certified and that the department had found that 18,000 RIPAE members had not used the program in the last eighteen months. She is concerned that many people are putting off enrollment in Part D and that if they do not apply prior to May 15th they will not be able to get benefits under a Part D plan until January 2007. She was asked about the March 15th deadline for RIPAE re-certification and reported that if a person is at the pharmacy and says that they have applied but did not get a card, they will be served. She also noted that RIPAE applications will be at pharmacies to ease re-certification applications.

Director Russo reported that community service grants had been targeted for 25% across the board cuts. Ms. Conant-Arp indicated that these 25% cuts will devastate senior community agencies including

Meal-on-Wheels and adult day services. She noted that already, adult day services receive \$27 less per day than what it actually costs them. She also noted that the proposed repeal of the 2.2% provider adjustment would be equally problematic for aging network providers. The only increase they have received since 1996 are two small wage pass-throughs. Providers are having great difficulty meeting their costs as costs for health care and other insurance has increased for them. She also noted that the proposed 1.5 FTE cuts to DEA staff would cause additional problems for persons trying to access care and delays in putting people on service. Ms. Carland from the Senior Center Directors Association also noted that the 25% cut would be problematic for them. In addition, there is a proposed 13.5% reduction in the customer information service staff (Information Specialists). She said that the cuts go to the core of what the senior network does and that senior center directors are also extremely concerned about the March 15th deadline for RIPAE re-certification. Director Russo reported that the department will be looking to receive Medicaid match for some services performed by the customer information specialists and that this would help make up for the cut in state dollars.

Ms. Hawkins voiced a concern that cuts to the home care programs will harm non-profit agencies and may cause additional persons to unnecessarily seek admission to nursing homes. Ms. Sweet stated that the broad 25% cut was not rational nor thoughtful. Ms. Morancy stated that 70% of persons with Alzheimer's are receiving care in family settings. Some 25,000 Rhode Islanders in 2005 had Alzheimer's

or another dementia. This figure is expected to increase to 29,000 persons by the year 2010. She discussed the bigger state budget picture and that it did not make sense to her that the state would give such huge tax breaks to a company, such as Fidelity, to help them purchase furniture and at the same time make such devastating cuts to services to seniors. Ms. Merkle noted that this is the worst situation she has seen in 22 years of working in aging services and that there is a 3-4 week wait for persons to get on home and community care services.

Chairman Fogarty raised the issue of the cut-off date for RIPAE saying that he fears that persons may be denied RIPAE use and not get the financial help they need and not fill necessary prescriptions which may force some individuals to end up in acute care hospital settings for lack of taking necessary medications.

„h Human Services - John Young

Mr. Young reported that this year's proposed DHS 2007 budget is more complicated and more challenging than any year he has been involved with in the past. He provided a summary detailing some of the major program changes. (See Attachment # 8) Some of the complication results from Medicare Part D. As of March 6th, the state spent \$1.1 million in pharmaceutical costs for 7,200 persons on Medicaid. Although the federal government has reduced the claw-back dollar amount, this will still be taking resources from DHS.

Mr. Young reported that the Deficit Reduction Act of 2005 will have an impact as we move forward in terms of eligibility for long term nursing home care and home and community care waivers. He noted

that there will be a decrease in federal funding because of the reduction in the federal Medicaid match rate which will cause a \$24.5 million resource shift over the next eighteen months. Mr. Young also noted that there is a potential for a significant number of state employees to retire. At DHS, 300 out of 1,100 employees would be eligible to retire and 500 employees out of the 2,000 at MHRH. Mr. Young also noted other changes at the federal level include a change in the community spousal allowance provision and institution of pharmacy price ceilings as the federal government thought Medicaid was overpaying for prescription drugs. The new formula involves a cap based on the "AMP", although he said he is not sure what this is. This may reduce Medicaid payments for prescriptions by 5% from what is currently paid.

The proposed budget also calls for securing supplemental rebates from pharmaceutical manufacturers. He noted that some 38 states currently use such a system. This would involve use of preferred drugs based on therapeutic choices made by professionals; however certain drug classes, such as psychotropics would be excluded. He noted that there would be pharmacy co-payments for those persons on Medicaid only but that they would be exempting Medicaid-only persons on home and community care waivers (this does not include dual eligibles or persons on SSI assisted living supplement). He also noted that the budget proposal calls for a delay of one quarter for the nursing home COLA. The DHS budget also includes the repeal of the 2.2% provider reduction and includes implementation of a managed care program in 2007 for adults with disabilities.

They are in the process of redesigning the PARI waiver and will be renaming it the "personal choice waiver" with expanded slots based on a consumer-directed cash and counseling model.

„h Mental Health, Retardation and Hospitals - John Young

Mr. Young reported there is a slight increase in the total budget with most of it coming from general funds. (Attachment #9) The most controversial component of the budget is a funding decrease for the home and community care waiver program for the developmentally disabled population. Out of \$250 million in total funds there is a proposed reduction of \$12 million, which includes \$5.8 million in state general revenue. He noted that the proposal as stated in the budget to reduce day service programs is just one way to save these dollars and that other options would be discussed and that the department is open to discussing other potential options to realize the savings. He noted the budget also includes privatization of four group homes that are currently run out of Zambarano Hospital. Seventeen persons are living in these homes. While some state employees may be impacted, they will try to accommodate them within the system particularly as they are facing so many potential retirements. He noted that the House Finance staff had requested an analysis of the legislative grants and that the Office of Health and Human Services is conducting this review that would include: who is served, what are the outcomes, and what are the alternative sources. Ms. Sweet noted that there will be hearings by the Legislature on the community service grants.

IV. Public Announcements and Public Comments

Denise Saran noted that she is concerned that, based on her experience as a consultant working with seniors at the DaVinci Center for Community Progress in Providence, there will be instances where persons may be denied RIPAE use because many individuals filed their applications late and their application is currently being processed. She also believes that some individuals are not willing to disclose their personal financial status and think they will be able to use the card they currently have.

V. Adjournment

The meeting adjourned at 11:40 a.m.

Next Scheduled meeting jV April 12th